Application for Permanent Water Right Transfer

O R E G O N

Oregon Water Resources Department
725 Summer Street NE, Suite A
Salem, Oregon 97301-1266
(503) 986-0900

www.oregon.gov/OWRD

Part 1 of 5 - Minimum Requirements Checklist

attachments are not completed and included. For questions, please call (503) 986-0900, and ask for Transfer Section. Received Check all items included with this application. (N/A = Not Applicable)FEB 14 2025 \boxtimes Part 1 - Completed Minimum Requirements Checklist. X Part 2 – Completed Transfer Application Map Checklist. X Part 3 – Application Fee, payable by check to the Oregon Water Resources Department, and completed Fee Worksheet, page 3. Try the new online fee calculator at: http://apps.wrd.state.or.us/apps/misc/wrd fee calculator. Part 4 - Completed Applicant Information and Signature. Part 5 – Information about Water Rights to be Transferred: How many water rights are to be transferred? 1 List them here: 98016 Attachment 1 Please include a separate Part 5 for each water right. (See instructions on page 6) NOTE: A separate transfer application is required for each water right unless the criteria in OAR 690-380-3220 are met. Attachments: Completed Transfer Application Map. Attachment 2 Completed Evidence of Use Affidavit and supporting documentation. Attachment 3 Affidavit(s) of Consent from Landowner(s) (if the applicant does not own the land the water right is on.) Supplemental Form D – For water rights served by or issued in the name of an irrigation district. Complete when the transfer applicant is not the irrigation district. Oregon Water Resources Department's Land Use Information Form with approval and signature from each local land use authority in which water is to be diverted, conveyed, and/or used. Not required if water is to be diverted, conveyed, and/or used only on federal lands or if <u>all</u> of the following apply: a) a change in place of use only, b) no structural changes, c) the use of water is for irrigation only, and d) the use is located within an irrigation district or an exclusive farm use zone. Attachment 4 Water Well Report/Well Log for changes in point(s) of appropriation (well(s)) or additional point(s) of appropriation. Attachment 5 Geologist Report for a change from a surface water point of diversion to a ground water point of appropriation (well), if the proposed well is more than 500' from the surface water source and more than 1000' upstream or downstream from the point of diversion. See OAR 690-380-2130 for requirements and applicability. (For Staff Use Only) WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S): Application fee not enclosed/insufficient Map not included or incomplete ____ Evidence of Use Form not enclosed or incomplete Land Use Form not enclosed or incomplete Additional signature(s) required Part is incomplete Other/Explanation

This transfer application will be returned if Parts 1 through 5 and all required

Staff:

503-

Date:

Part 2 of 5 - Transfer Application Map

Your transfer application will be returned if any of the map requirements listed below the met.

		sure that the transfer application map you submit includes all the required items and he existing water right map. Check all boxes that apply.
\boxtimes 1	□ N/A	Certified Water Right Examiner (CWRE) Stamp and Original Signature. For a list of CWREs, see http://apps.wrd.state.or.us/apps/wr/cwre_license_view/ . CWRE stamp and signature are not required for substitutions.
	⊠ N/A	If more than three water rights are involved, separate maps are needed for each water right.
\boxtimes		Permanent quality printed with dark ink on good quality paper.
\boxtimes		The size of the map can be $8\% \times 11$ inches, $8\% \times 14$ inches, 11×17 inches, or up to 30×30 inches. For 30×30 inch maps, one extra copy is required.
\boxtimes		A north arrow, a legend, and scale.
		The scale of the map must be: 1 inch = 400 feet, 1 inch = 1,320 feet, the scale of the Final Proof/Claim of Beneficial Use Map (the map used when the permit was certificated), the scale of the county assessor map if the scale is not smaller than 1 inch = 1,320 feet, or a scale that has been pre-approved by the Department.
\boxtimes		Township, Range, Section, ¼ ¼, DLC, Government Lot, and other recognized public land survey lines.
\boxtimes		Tax lot boundaries (property lines) are required. Tax lot numbers are recommended.
\boxtimes		Major physical features including rivers and creeks showing direction of flow, lakes and reservoirs, roads, and railroads.
\boxtimes		Major water delivery system features from the point(s) of diversion/appropriation such as main pipelines, canals, and ditches.
		Existing place of use that includes separate hachuring for each water right, priority date, and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions. If less than the entirety of the water right is being changed, a separate hachuring is needed for lands left unchanged.
\boxtimes	□ N/A	Proposed place of use that includes separate hachuring for each water right, priority date, and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions.
\boxtimes		Existing point(s) of diversion or well(s) with distance and bearing or coordinates from a recognized survey corner. This information can be found in your water right certificate or permit.
	□ N/A	If you are proposing a change in point(s) of diversion or well(s), show the proposed location and label it clearly with distance and bearing or coordinates. If GPS coordinates are used, latitude-longitude coordinates may be expressed as either degrees-minutes-seconds with at least one digit after the decimal (example $-42^{\circ}32'15.5''$) or degrees-decimal with five or more digits after the decimal (example -42.53764°).

Part 3 of 5 - Fee Worksheet

	FEE WORKSHEET for PERMANENT TRANSFER (except Substitution)							
1	Base Fee (includes one type of change to one water right for up to 1 cfs)	1	\$1,360					
	Types of change proposed:							
	Number of above boxes checked = $\frac{2(2a)}{}$							
	Subtract 1 from the number in line $2a = \frac{1(2b)}{1}$ If only one change, this will be 0							
2	Multiply line 2b by \$1090 and enter » » » » » » » » » » » » » » » » » » »	2	\$1,090					
	Number of water rights included in transfer <u>1 (3a)</u>							
	Subtract 1 from the number in 3a above: <u>0 (3b)</u> If only one water right this will be 0							
3	Multiply line 3b by \$610 and enter » » » » » » » » » » » » » » » » » » »	3	\$0					
	Do you propose to add or change a well, or change from a surface water POD to a well?							
	No: enter 0 Yes: enter \$480 for the 1 st well to be added or changed \$480 (4a)							
	Do you propose to add or change additional wells?							
	No: enter 0 Yes: multiply the number of additional wells by \$410 \$0 (4b)							
4	Add line 4a to line 4b and enter » » » » » » » » » » » » » » »	4	\$480					
	Do you propose to change the place of use or character of use?							
	No: enter 0 on line 5							
	\boxtimes Yes: enter the cfs for the portions of the rights to be transferred (see below*):(5a)							
	Subtract 1.0 from the number in 5a above:(5b)							
	If 5b is 0 or less, enter 0 on line 5 » » » » » » » » » » » » » » »							
_	If 5b is greater than 0, round up to the nearest whole number:(5c) and multiply		4.0					
5	5c by \$410, then enter on line 5 » » » » » » » » » » » » » » » » » »	5						
6	Add entries on lines 1 through 5 above » » » » » » » » » Subtotal:	6	\$2,930					
	Is this transfer: necessary to complete a project funded by the Oregon Watershed Enhancement Board							
	(OWEB) under ORS 541.932?							
	endorsed in writing by ODFW as a change that will result in a net benefit to fish and							
	wildlife habitat?							
	If one or more boxes is checked, multiply line 6 by 0.5 and enter on line 7 »							
7	If no box is applicable, enter 0 on line 7 » » » » » » » » » » » » » » » » » »	7	\$0					
8	Subtract line 7 from line 6 » » » » » » » » » » » » » » » » » Transfer Fee:	8	\$2,930					

*Example for Line 5a calculation to transfer 45.0 acres of Primary Certificate 12345 (total 1.25 cfs for 100 acres) and 45.0 acres of Supplemental Certificate 87654 (1/80 cfs per acre) on the same land:

1. For irrigation calculate cfs for each water right involved as follows:

a. Divide total authorized cfs by total acres in the water right (for C12345, 1.25 cfs ÷100 ac); then multiply by the number of acres to be transferred to get the transfer cfs (x 45 ac= 0.56 cfs).

b. If the water right certificate does not list total cfs, but identifies the allowable use as 1/40 or 1/80 of a cfs per acre; multiply number of acres proposed for change by either 0.025 (1/40) or 0.0125 (1/80). (For C87654, 45.0 ac x 0.0125 cfs/ac = 0.56 cfs)

2. Add cfs for the portions of water rights on all the land included in the transfer; however do not count cfs for supplemental rights on acreage for which you have already calculated the cfs fee for the primary right on the same land. The fee should be assessed only once for each "on the ground" acre included in the transfer. (In this example, blank 5a would be only 0.56 cfs, since both rights serve the same 45.0 acres. Blank 5b would be 0 and Line 5 would then also become 0).

,	<u> </u>		
	FEE WORKSHEET for SUBSTITUTION		
1	Base Fee (includes change to one well)	1	\$990.00
	Number of wells included in substitution(2a)		
	Subtract 1 from the number in 2a above:(2b) If only one well this will be 0		
2	Multiply line 2b by \$480 and enter » » » » » » » » » » » » » »	2	
3	Add entries on lines 1 through 2 above » » » » » Fee for Substitution:	3 0	CONANA

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Part 4 of 5 - Applicant Information and Signature

Applicant Information

APPLICANT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.
T & K Sester Family, LL	C; Attn: Ted Sester		503-663-4844	
ADDRESS				FAX NO.
24200 SE Highway 212				
CITY	STATE	ZIP	E-MAIL	
Damascus OR 97089 ted@sesterfarms.com				

Agent Information – The agent is authorized to represent the applicant in all matters relating to this application.

AGENT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.
Summit Water Resourc	es, LLC: Ted Ressle	r, RG, CWRE	503-967-7050	
ADDRESS				FAX NO.
4784 SE 17th Avenue, S	uite 111			127
CITY	STATE	ZIP	E-MAIL	
Portland	OR	97202	tressler@summitw	r.com

Explain in your own words what you propose to accomplish with this transfer application, and why: The application is requesting to 1) add an additional well to the water right to allow increased flexibility for the nursery's existing irrigation operations, and 2) adjust a portion of the place of use to accommodate recent changes in the configuration of irrigated fields at the nursery.

If you need additional space, continue on a separate piece of paper and attach to the application as "Attachment 1".

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By	my s	ignature	below,	confirm t	that I	understand:
----	------	----------	--------	-----------	--------	-------------

	By my signature below, I confir	m that i ui	naerstana:							
•	Prior to Department approval of the transfer application, I may be required to submit payment to the Department for publication of a notice in a newspaper with general circulation in the area where the water right is located, once per week for two consecutive weeks. If more than one qualifying newspaper is available, I suggest publishing the notice in the following newspaper:									
•	Amendments to the application may only be made in response to the Department's Draft Preliminary Determination (DPD). The applicant will have a period of at least 30 days to amend the application to address any issues identified by the Department in the DPD, or to withdraw the application. Note that amendments may be subject to additional fees, pursuant to ORS 536.050.									
•	 Failure to complete an approved change in place of use and/or change in character of use, will result in loss of the water right (OAR 690-380-6010). 									
•	refund of all or part of a fee is of the Department.	appropria	ate in the inte	erests of fairness to t	he public or nece					
1	I (we) affirm that the information	on contair	ned in this ap	plication is true and	accurate.					
	Applicant signature			Ted Sester, Manag T&K Sester Family Print Name (and Tit	LLC	Z/12/202 Date	25			
	Is the applicant the sole owner of located? \boxtimes Yes \square No*	of the land	on which the	e water right, or por	tion thereof, prop	oosed for transfer is	110/02/			
1	*If NO, include signatures of all de attach affidavits of consent (and I water right(s) were conveyed.									
(Check the following boxes that o	apply:								
	The applicant is response sent to the applicant.	sible for co	ompletion of	change(s). Notices a	nd corresponden	ce should continue	to be			
	The receiving landowned issued. Copies of notice					after the final order	ris			
	Both the receiving land and correspondence sh					ange(s). Copies of n	otice			
	At this time, are the lands in this	s transfer	application in	the process of being	g sold? 🔲 Yes 🛭	☑ No				
	If YES, and you know who the below. If you do not know wat a later date.									
	If a property sells, the certifunless a sale agreement or									

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Check here if any of the water rights pro an irrigation or other water district. (Tip : Co	•				
IRRIGATION DISTRICT NAME	ADDRESS	marronn z.,			
CITY	STATE	ZIP			
Check here if water for any of the rights contract for stored water with a federal		e agreement or other			
ENTITY NAME	NAME ADDRESS				
CITY	STATE	ZIP			
To meet State Land Use Consistency Requir corporation, or tribal governments within v	The second secon	AND THE PARTY OF T			
ENTITY NAME	ADDRESS				
Clackamas County	150 Beavercreek Rd.				
CITY	STATE	ZIP			
Oregon City	OR	97045			
ENTITY NAME	ADDRESS				
CITY	STATE	ZIP			

Permanent Transfer Application Form – Page 6 of 10

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INSTRUCTIONS for editing the Application Form

To add additional lines to tables within the forms or to copy and paste additional Part 5 pages, please save the application form to your computer. Unlock the document by using one of the following instructions for your Microsoft Word software version:

instructions for your Microsoft Word software version:

Microsoft Word 2003

Unlock the document by one of the following:

- Using the Tools menu => click Unprotect Document;
 OR
- Using the Forms toolbar => click on the Protect/Unprotect icon.

To relock the document to enable the checkboxes to work, you will need to:

Using the Tools menu => click Protect Document;

OR

Using the Forms toolbar => click on the Protect/Unprotect icon.

Once the application has been unlocked, you may:

- add additional rows to tables using the Table tools, and
- select and copy the pages of Part 5 and paste as many additional sets of Part 5 pages as needed at the end of the application.

After editing, re-lock the document to enable checkboxes to work.

Microsoft Word 2007

- Unlock the document by clicking the Review tab, then click Protect Document, then click
 Stop Protect
- To relock the document, click **Editing Restrictions**, then click **Allow Only This Type of Editing**, select **Filling In Forms** from the drop-down menu, then check **Yes, Start Enforcing Protection**.

Microsoft Word 2010

- Unlock the document by clicking the Review tab; toggle the Restrict Editing icon at the upper right, then click Stop Protect at the bottom right. Then uncheck the "Allow only this type of editing in the document: Filling in forms" in the "Editing restrictions" section on the right-hand list of options.
- To relock the document, check the Editing Restrictions/Allow Only This Type of Editing/Filling In
 Forms box from the drop-down menu, then check Yes, Start Enforcing Protection. You do not need to
 assign a password for the editing restrictions.

Other Alternatives:

- Photocopy pages or tables in Part 5, mark-through any non-applicable information, insert/attach
 photocopied pages to document in the appropriate location, and manually amend page numbers as
 necessary (e.g. Page 5 6 of 9 10).
- You may refer to additional attachments that you may include, such as separately produced tables or spreadsheets to convey large numbers of rows of place of use listings, owner/property parcels, etc.
 You may contact the Department at 503-986-0900 and ask for Transfer Staff if you have questions.

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Part 5 of 5 – Water Right Information

Please use a separate Part 5 for each water right being changed. See instructions on page 6, to copy and paste additional Part 5s, or to add additional rows to tables within the form.

	CERTIFICATE # 98016	2	
Description of Wa	ater Delivery System	× ×	Received
System capacity:	0.37 cubic feet per second (cfs) OR		FEB 14 2025

____ gallons per minute (gpm)

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Describe the current water delivery system or the system that was in place at some time within the last five years. Include information on the pumps, canals, pipelines, and sprinklers used to divert, convey, and apply the water at the authorized place of use. Water is pumped from four wells into an adjacent holding pond (system bulge), from which the irrigation system pumps redivert the water for delivery to the place of use.

Table 1. Location of Authorized and Proposed Point(s) of Diversion (POD) or Appropriation (POA) (Note: If the POD/POA name is not specified on the certificate, assign it a name or number here.)

POD/POA Name or Number	Is this POD/POA Authorized on the Certificate or is it Proposed?	If POA, OWRD Well Log ID# (or Well ID Tag # L)	Tv	Twp		ng	Sec	1/4	1/4	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
Well 1	Authorized Proposed	CLAC 55502/55576	2	s	3	E	10	NE	NE	300	400 feet South and 613 feet West from the NE corner of Section 10
Well 2	Authorized Proposed	CLAC 72510	2	s	3	E	10	NE	NE	100	448 feet South and 87 feet West from the NE corner of Section 10
Well 3	Authorized Proposed	CLAC 74849	2	s	3	E	10	NE	NE	300	345 feet South and 395 feet West from the NE corner of Section 10
Well 4	Authorized Proposed	CLAC 74936	2	s	3	E	10	NE	NE	300	505 feet South and 635 feet West from the NE corner of Section 10
Well 5	☐ Authorized ☐ Proposed	CLAC 4718	2	s	3	E	11	NW	NW	1600	170 feet South and 955 feet East from NE corner of Section 10

Check all type(s) of change(s) proposed below (change "CODES" are provided in parentheses): Place of Use (POU) Supplemental Use to Primary Use (S to P) Character of Use (USE) Point of Appropriation/Well (POA) Point of Diversion (POD) Additional Point of Appropriation (APOA) Additional Point of Diversion (APOD) Substitution (SUB) Surface Water POD to Ground Water Government Action POD (GOV) POA (SW/GW) Will all of the proposed changes affect the entire water right? Xes Complete only the Proposed ("to" or "on" lands) section of Table 2 on the next page. Use the "CODES" listed above to describe the proposed changes. No Complete all of Table 2 to describe the portion of the water right to be changed.

Please use and attach additional pages of Table 2 as needed. See page 6 for instructions.

Do you have questions about how to fill-out the tables? Contact the Department at 503-986-0900 and ask for Transfer Staff.

Table 2. Description of Changes to Water Right Certificate # 98016

List the change proposed for the acreage in each ¼ ¼. If more than one change is proposed, specify the acreage associated with each change. If there is more than one POD/POA involved in the proposed changes, specify the acreage associated with each POD/POA.

Т	he		_	at ap	pears	on th	e cert	ificate		s) POSED CHAI II be changed.		Proposed Changes (see			7	Γhe	listir			ıld app		FTER F	n" lands) PROPOSED	CHANGE	S
Twp	Rr	ng	Sec	1/4	1/4	Tax Lot	Gvt Lot or DLC	Acres	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Priority Date	"CODES" from previous page)	TV	vр	Rr	ng	Sec	%	1/4	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date
												EXAMPLE													
2 S	9	E	15	NE	NW	100		15.0	Irrigation	POD #1 POD #2	1901	POU/POD	2	s	9	E	1	NW	NW	500	1	10.0		POD #5	1901
													2	S	9	Ε	2	sw	NW	500		5.0		POD #6	1901
												POU, APOA	2	s	3	E	10	NE	NE	100, 200, 300		10.7	IR	Well 1 Well 2 Well 3 Well 4 Well 5	7/20/1960
												POU, APOA	2	s	3	E	10	SE	NE	300		36.3	IR	"	
					TO	TAL AC	RES:			L									TO	TAL AC	RES:	47.0			

Additional remarks: This transfer application includes a request to change the place of use of the entire water right (47.0 acres) and is adding an additional point of appropriation that will be used to provide water for the entire place of use.

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For Place of Use or Character of Use Changes

•	OI FIE	ice of ose of character of ose changes
		here other water right certificates, water use permits or ground water registrations associated the "from" or the "to" lands? \square Yes \boxtimes No
	If YE	S, list the certificate, water use permit, or ground water registration numbers:
>	a pri	uant to ORS 540.510, any "layered" water use such as an irrigation right that is supplemental to imary right proposed for transfer must be included in the transfer or be cancelled. Any change ground water registration must be filed separately in a ground water registration modification application.
F	or Sul	bstitution (ground water supplemental irrigation will be substituted for surface water primary irrigation)
		nd water supplemental Permit or Certificate #; ace water primary Certificate #
F	or a c	hange from Supplemental Irrigation Use to Primary Irrigation Use
	Ident	tify the primary certificate to be cancelled. Certificate #
F	or a c	hange in point(s) of appropriation (well(s)) or additional point(s) of appropriation:
	\boxtimes	Well log(s) are attached for each authorized and proposed well(s) that are clearly labeled and associated with the corresponding well(s) in Table 1 above and on the accompanying application map. Tip: You may search for well logs on the Department's web page at: http://apps.wrd.state.or.us/apps/gw/well_log/Default.aspx
	AND	/OR
		Describe the construction of the authorized and proposed well(s) in Table 3 for any wells that do not have a well log. For <i>proposed wells not yet constructed or built</i> , provide "a best estimate" for each requested information element in the table. The Department recommends you consult a licensed well driller, geologist, or certified water right examiner to assist with assembling the information necessary to complete Table 3.
		Construction of Point(s) of Appropriation (s) in this listing must be clearly tied to corresponding well(s) described in Table 1 and shown on the

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accompanying application map. Failure to provide the information will delay the processing of your transfer application until it is received. The information is necessary for the department to assess whether the proposed well(s) will access the same source aquifer as the authorized point(s) of appropriation (POA). The Department is prohibited by law from approving POA changes that do not access the same source aquifer.

Proposed or Authorized POA Name or Number	Is well already built? (Yes or No)	If an existing well: OWRD Well ID Tag No. L	Total well depth	Casing Diameter	Casing Intervals (feet)	Seal depth(s) (intervals)	Perforated or screened intervals (in feet)	Static water level of completed well (in feet)	Source aquifer (sand, gravel, basalt, etc.)	Well -specific rate (cfs or gpm). If less than full rate of water right
					·					
					/2					
		72110			1.0			Receiv	red ,	

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Attachment 1
Water Right Information

STATE OF OREGON

COUNTY OF CLACKAMAS

CERTIFICATE OF WATER RIGHT

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THIS CERTIFICATE ISSUED TO

T AND K SESTER FAMILY LLC 24200 SE HWY 212 DAMASCUS OR 97089

confirms the right to the use of water perfected under the terms of Permit G-1645. The amount of water used to which this right is entitled is limited to the amount used beneficially, and shall not exceed the amount specified, or its equivalent in the case of rotation, measured at the well(s). The specific limits and conditions of the use are listed below.

SOURCE OF WATER: FOUR WELLS, A TRIBUTARY OF DEEP CREEK (CLACKAMAS RIVER)

PURPOSE OR USE: IRRIGATION OF 47.0 ACRES

MAXIMUM RATE: 0.37 CUBIC FOOT PER SECOND (CFS), FURTHER LIMITED TO 0.33 CFS FROM WELL 1, 0.27 CFS FROM WELL 2, 0.20 CFS FROM WELL 3, AND 0.18 CFS FROM WELL 4, NOT TO EXCEED 0.37 CFS IN ANY COMBINATION FROM ALL WELLS

DATE OF PRIORITY: JULY 20, 1960

The wells are located as follows:

Twp	Rng	Mer	Sec	Q-Q	Measured Distances
25	3 E	WM	10	NE NE	WELL 1 (AUTHORIZED) - 400 FEET SOUTH AND 613 FEET WEST FROM NE CORNER, SECTION 10
25	3 E	WM	10	NE NE	WELL 2 (AUTHORIZED) - 448 FEET SOUTH AND 87 FEET WEST FROM NE CORNER, SECTION 10
25	3 E	WM	10	NE NE	WELL 3 (ADDITIONAL) – 345 FEET SOUTH AND 395 FEET WEST FROM NE CORNER, SECTION 10
25	3 E	WM	10	NE NE	WELL 4 (ADDITIONAL) - 505 FEET SOUTH AND 635 FEET WEST FROM NE CORNER, SECTION 10

The amount of water used for irrigation, together with the amount secured under any other right existing for the same lands, shall be limited to ONE-EIGHTIETH of one cubic foot per second per acre, or its equivalent for each acre irrigated and shall be further limited to a diversion of not to exceed 2.5 acre-feet per acre for each acre irrigated during the irrigation season of each year, and shall conform to such reasonable rotation system as may be ordered by the proper state officer.

A description of the place of use is as follows:

Twp	Rng	Mer	Sec	Q-Q	Acres
25	3 E	WM	10	NE NE	10.9
25	3 E	WM	10	SE NE	36.1

NOTICE OF RIGHT TO PETITION FOR RECONSIDERATION OR JUDICIAL REVIEW

This is an order in other than a contested case. This order is subject to judicial review under ORS 183.482. Any petition for judicial review must be filed within the 60-day time period specified by ORS 183.482. Pursuant to ORS 183.482, ORS 536.075 and OAR 137-003-0675, you may petition for judicial review and petition the Director for reconsideration of this order. A petition for reconsideration may be granted or denied by the Director, and if no action is taken within 60 days following the date the petition was filed, the petition shall be deemed denied.

T-13348-cf-94408.ra.klk

Page 1 of 2

Certificate 98016

Water use measurement conditions:

- A. The water user shall maintain the totalizing flow meter or other suitable measuring device as approved by the Director in good working order at each point of appropriation.
- B. The water user shall allow the Watermaster access to the meters or measuring devices; provided however, where the meters or measuring devices are located within a private structure, the Watermaster shall request access upon reasonable notice.

The quantity of water diverted at the additional points of appropriation (Well 3 and Well 4), together with that diverted at the authorized points of appropriation (Well 1 and Well 2), shall not exceed the quantity of water lawfully available at the original point of appropriation as described:

Twp	Rng	Mer	Sec	Q-Q	Measured Distances
25	3 E	WM	10	NE NE	ORIGINAL WELL - 360 FEET SOUTH AND 610 FEET WEST
		La Till Control	4		FROM NE CORNER, SECTION 10

Water shall be acquired from the same aquifer (water source) as the original point of appropriation.

The right to the use of the water for the above purpose is restricted to beneficial use on the place of use described.

This certificate is issued to confirm a change in ADDITIONAL POINTS OF APPROPRIATION approved by an order of the Water Resources Director entered AUGUST 18, 2022, at Special Order Volume 125, Page 617, approving Transfer Application T-13348, supersedes Certificate 94408, State Record of Water Right Certificates.

Issued

. 1

Dwight French

Water Right Services Division Administrator, for

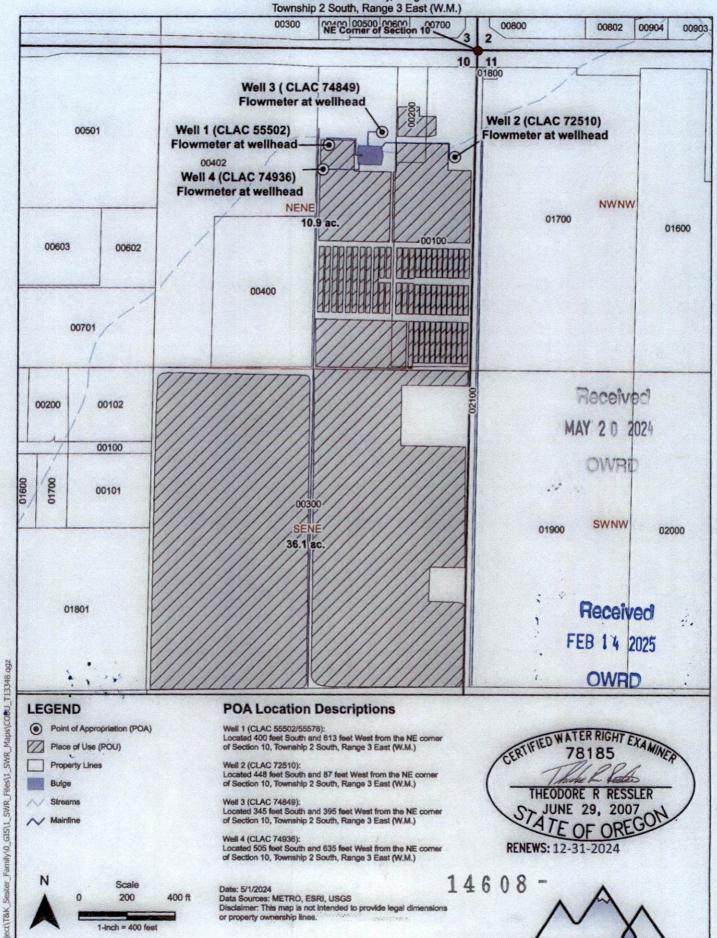
Ivan Gall, Director

Oregon Water Resources Department



Claim of Beneficial Use Transfer T-13348

A Water Right held by T&K Sester Family, LLC Clackamas County, Oregon



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Attachment 2

Maps

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FEB 1 4 2025
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Attachment 3
Evidence of Use Affidavit

Application for Water Right **Transfer**

Evidence of Use Affidavit



Oregon Water Resources Department 725 Summer Street NE, Suite A Salem, Oregon 97301-1266 (503) 986-0900 www.wrd.state.or.us

Please print legibly or type. Be as specific as possible. Attach additional pages if you need more spacing.

Supporting documentation must be attached.

State o	f Oregon)	SS				*		
County	of <u>CLACKAMAS</u>)			,							
I, TED S	ESTER, in my ca	pacity a	s MANAGE	ER (T	&K Ses	STER FAM	ILY LLC)		TA STAMP		
mailing	address 2420	0 SE Hig	HWAY 212	2					THE STATE OF THE S	Bartistan daga	
telepho	one number (<u>5</u>	<u>03)663-</u>	4844, be	ing fi	irst du	ıly swor	n depos	e and say:		-	
1.	My knowledg	e of the	exercise	or s	tatus	of the w	vater rig	ht is based	on (check one):	:	
	□ Person	nal obs	ervation				Profes	sional expe	ertise		Receive
2.	I attest that:									· F	EB 1 4 20
	(A-11-10-10-10-10-10-10-10-10-10-10-10-10-			50336	e prev	ious fiv	e years	on the ent	ire place of use t	for	
	Certi	ricate #	<u>98016</u> ; O	R						A.	OWRD
	My k	nowled	ge is spec	ific t	o the	use of v	water at	the follow		thin the last five y	rears:
	Certificate #	Town	ship	Rang	ge	Mer	Sec	1/4 1/4	Gov't Lot or DLC	Acres (if applicable)	

	***************************************			1							
OR	***************************************										
\boxtimes	Confirming C	ertificat	e # <u>9801</u>	<u>6</u> has	been	issued	within t	he past fiv	e years; OR		
			_						thin the last five	years. The	
	instream leas transfer was						100	A 155A		eased instream.);	; OR
		tht is no	t subject	to fo	rfeitu	ire and	docume			n of forfeiture for	
	Water has be								opropriation for	more than	
	1.							anaa aida\			

(continues on reverse side)

3. The water right was used for: (e.g., crops, pasture, etc.): NURSEY PLANTS

4. I understand that if I do not attach one or more of the documents shown in the table below to support the above statements, my application will be considered incomplete.

hed late	
Signature of Affiant	

2/12/2025 Date

Signed and sworn to (or affirmed) before me this 12 day of February 20_25



Motor Public for Orogan

My Commission Expires: October 3, 2028

Supporting Documents	Examples
Copy of a water right certificate that has been issued within the last five years. (not a remaining right certificate)	Copy of confirming water right certificate that shows issue date
Copies of receipts from sales of irrigated crops or for expenditures related to use of water	 Power usage records for pumps associated with irrigation use Fertilizer or seed bills related to irrigated crops Farmers Co-op sales receipt
Records such as FSA crop reports, irrigation district records, NRCS farm management plan, or records of other water suppliers	 District assessment records for water delivered Crop reports submitted under a federal loan agreement Beneficial use reports from district IRS Farm Usage Deduction Report Agricultural Stabilization Plan CREP Report
Aerial photos containing sufficient detail to establish location and date of photograph	Multiple photos can be submitted to resolve different areas of a water right. If the photograph does not print with a "date stamp" or without the source being identified, the date of the photograph and source should be added. Sources for aerial photos: OSU –www.oregonexplorer.info/imagery OWRD – www.wrd.state.or.us Google Earth – earth.google.com TerraServer – www.terraserver.com
Approved Lease establishing beneficial use within the last 5 years	Copy of instream lease or lease number Received

FEB 14 2025

STATE OF OREGON

COUNTY OF CLACKAMAS

CERTIFICATE OF WATER RIGHT

Received FEB 14 2025

OWRD

THIS CERTIFICATE ISSUED TO

T AND K SESTER FAMILY LLC 24200 SE HWY 212 DAMASCUS OR 97089

confirms the right to the use of water perfected under the terms of Permit G-1645. The amount of water used to which this right is entitled is limited to the amount used beneficially, and shall not exceed the amount specified, or its equivalent in the case of rotation, measured at the well(s). The specific limits and conditions of the use are listed below.

SOURCE OF WATER: FOUR WELLS, A TRIBUTARY OF DEEP CREEK (CLACKAMAS RIVER)

PURPOSE OR USE: IRRIGATION OF 47.0 ACRES

MAXIMUM RATE: 0.37 CUBIC FOOT PER SECOND (CFS), FURTHER LIMITED TO 0.33 CFS FROM WELL 1, 0.27 CFS FROM WELL 2, 0.20 CFS FROM WELL 3, AND 0.18 CFS FROM WELL 4, NOT TO EXCEED 0.37 CFS IN ANY COMBINATION FROM ALL WELLS

DATE OF PRIORITY: JULY 20, 1960

The wells are located as follows:

Twp	Rng	Mer	Sec	Q-Q	Measured Distances
2 \$	3 E	WM	10	NE NE	WELL 1 (AUTHORIZED) - 400 FEET SOUTH AND 613 FEET WEST FROM NE CORNER, SECTION 10
25	3 E	WM	10	NE NE	WELL 2 (AUTHORIZED) - 448 FEET SOUTH AND 87 FEET WEST FROM NE CORNER, SECTION 10
25	3 E	WM	10	NE NE	WELL 3 (ADDITIONAL) – 345 FEET SOUTH AND 395 FEET WEST FROM NE CORNER, SECTION 10
25	3 E	WM	10	NE NE	WELL 4 (ADDITIONAL) - 505 FEET SOUTH AND 635 FEET WEST FROM NE CORNER, SECTION 10

The amount of water used for irrigation, together with the amount secured under any other right existing for the same lands, shall be limited to ONE-EIGHTIETH of one cubic foot per second per acre, or its equivalent for each acre irrigated and shall be further limited to a diversion of not to exceed 2.5 acre-feet per acre for each acre irrigated during the irrigation season of each year, and shall conform to such reasonable rotation system as may be ordered by the proper state officer.

A description of the place of use is as follows:

Twp	Rng	Mer	Sec	Q-Q	Acres	
25	3 E	WM	10	NE NE	10.9	
25	3 E	WM.	10	SE NE	36.1	

NOTICE OF RIGHT TO PETITION FOR RECONSIDERATION OR JUDICIAL REVIEW

This is an order in other than a contested case. This order is subject to judicial review under ORS 183.482. Any petition for judicial review must be filed within the 60-day time period specified by ORS 183.482. Pursuant to ORS 183.482, ORS 536.075 and OAR 137-003-0675, you may petition for judicial review and petition the Director for reconsideration of this order. A petition for reconsideration may be granted or denied by the Director, and if no action is taken within 60 days following the date the petition was filed, the petition shall be deemed denied.

T-13348-cf-94408.ra.klk

Page 1 of 2

Certificate 98016

Water use measurement conditions:

- A. The water user shall maintain the totalizing flow meter or other suitable measuring device as approved by the Director in good working order at each point of appropriation.
- B. The water user shall allow the Watermaster access to the meters or measuring devices; provided however, where the meters or measuring devices are located within a private structure, the Watermaster shall request access upon reasonable notice.

The quantity of water diverted at the additional points of appropriation (Well 3 and Well 4), together with that diverted at the authorized points of appropriation (Well 1 and Well 2), shall not exceed the quantity of water lawfully available at the original point of appropriation as described:

Twp	Rng	Mer	Sec	Q-Q	Measured Distances
25	3 E	WM	10	NE NE	ORIGINAL WELL - 360 FEET SOUTH AND 610 FEET WEST
	a State of	BER 14			FROM NE CORNER, SECTION 10

Water shall be acquired from the same aquifer (water source) as the original point of appropriation.

The right to the use of the water for the above purpose is restricted to beneficial use on the place of use described.

This certificate is issued to confirm a change in ADDITIONAL POINTS OF APPROPRIATION approved by an order of the Water Resources Director entered AUGUST 18, 2022, at Special Order Volume 125, Page 617, approving Transfer Application T-13348, supersedes Certificate 94408, State Record of Water Right Certificates.

Issued

180

Dwight French

Water Right Services Division Administrator, for

Ivan Gall, Director

Oregon Water Resources Department

SEP 2 7, 2024

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Attachment 4
Land Use Information Form

Land Use Information Form



Oregon Water Resources Department 725 Summer Street NE, Suite A Salem, Oregon 97301-1266 (503) 986-0900 www.oregon.gov/OWRD

Received FEB 14 2025

NOTE TO APPLICANTS

OWRD

In order for your application to be processed by the Oregon Water Resources Department (OWRD), this Land Use Information Form must be completed by a local government planning official in the jurisdiction(s) where your water right will be diverted, conveyed, used, and developed. The planning official may choose to complete the form while you wait or return the "Receipt Acknowledging Request for Land Use Information" to you. Applications received by OWRD without the Land Use Information Form, or the signed receipt, will be returned to you. IMPORTANT: Please note that while OWRD can accept a signed receipt as part of intake for an application for a new permit to use or store water, a completed Land Use Information Form is required for OWRD's acceptance of all other applications. Please be aware that your application cannot be approved without land use approval.

This form is NOT required if:

- 1) Water is to be diverted, conveyed, and used on federal lands only; OR
- 2) The application is for a water right transfer, allocation of conserved water, exchange, permit amendment, or ground water registration modification, and <u>all</u> of the following apply:
 - **a.** The existing and proposed water use is located entirely within lands zoned for exclusive farm-use or within an irrigation district;
 - b. The application involves a change in place of use only;
 - **c.** The change does not involve the placement or modification of structures, including but not limited to water diversion, impoundment, distribution facilities, water wells and well houses; **and**
 - d. The application involves irrigation water uses only.

NOTE TO LOCAL GOVERNMENTS

The person presenting the attached Land Use Information Form is applying for a new water right or modifying an existing water right. The Oregon Water Resources Department (OWRD) requires applicants to obtain land use information to ensure the water right does not result in land uses that are incompatible with your comprehensive plan. Please complete the form and return it to the applicant for inclusion in their application. **NOTE:** For new water right applications only, if you are unable to complete this form while the applicant waits, you may complete the "Receipt Acknowledging Request for Land Use Information" and return it to the applicant.

You will receive notice via OWRD's weekly Public Notice once the applicant formally submits their request to OWRD. The notice will give more information about OWRD's water right process and provide additional comment opportunities. If you previously only completed the receipt for an application for a new permit to use or store water, you will have 30 days from the Public Notice date to complete the Land Use Information Form and return it to OWRD. Your attention to this request for information is greatly appreciated. If you have questions concerning this form, please contact OWRD's Customer Service Group at 503-986-0900 or WRD_DL_customerservice@water.oregon.gov.

OWRD Land Use Information Form — Page 1 of 4

Last Revised: 10/2023

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Land Use Information Form

Received FEB 1 4 2025



Oregon Water Resources Department 725 Summer Street NE, Suite A Salem, Oregon 97301-1266 (503) 986-0900 www.oregon.gov/OWRD

NAME				PHONE
T&K Sester Family LLC				503-663-4844
MAILING ADDRESS				
24200 SE Highway 212				
CITY	STATE	ZIP	EMAIL	
Damascus	OR	97089	ted@sesterfarms.com	l

A. Land and Location

Please include the following information for all tax lots where water will be diverted (taken from its source), conveyed (transported), and/or used or developed. Applicants for municipal use, or irrigation uses within irrigation districts, may substitute existing and proposed service-area boundaries for the tax-lot information requested below.

Township	Range	Section	1/4 1/4	Tax Lot #	Plan Designation (e.g., Rural Residential/RR-5)		Water to be:		Proposed Land Use:
2 S	3 E	10	NENE	100 200 300	AG	☑ Diverted		⊠ Used	Irrigation
2 S	3 E	10	SENE	300	AG	Diverted	□ Conveyed	☑ Used	Irrigation
2 S	3E	11	NWNW	2100 1700 1800 1600	AG	☑ Diverted	☑ Conveyed	Used	Irrigation

List all counties and cities where water is proposed to be diverted, conveyed, and/or used or developed: Clackamas NOTE: A separate Land Use Information Form must be completed and submitted for each county and city, as applicable. **B.** Description of Proposed Use Type of application to be filed with the Oregon Water Resources Department: Permit Amendment or Ground Water Registration Modification Permit to Use or Store Water Water Right Transfer Limited Water Use License Exchange of Water ☐ Allocation of Conserved Water Source of water: Reservoir/Pond Ground Water Surface Water (name) Estimated quantity of water needed: 0 cubic feet per second gallons per minute acre-feet Intended use of water: | Irrigation Commercial Industrial Domestic for _____ household(s) Quasi-Municipal Municipal Instream Other Briefly describe: The applicant is submitting an application for a permanent water right transfer to add an additional well (located on TL 1600) to pump groundwater under existing Certificate 98016, and to adjust the location of the irrigated footprint to accommodate on-farm infrastructure changes. No additional use of water is associated with this application beyond the current authorized capacity of Certificate 98016 (0.37 cfs).

Note to applicant: For new water right applications only, if the Land Use Information Form cannot be completed while you wait, please have a local government representative sign the receipt on the bottom of page 4 and include it with the application filed with the Oregon Water Resources Department.

See Page 4 ->

For Local Government Use Only

OWRD

The following section must be completed by a planning official from each county and city listed unless the project will be located entirely within the city limits. In that case, only the city planning agency must complete this form. This deals only with the local land use plan. Do not include approval for activities such as building or grading permits.

Please check the appropriate box b	pelow and provide the requested info	rmation	· ·
	water use(s), including proposed construction Cite applicable ordinance section(s):		outright or are not
Land uses to be served by the proposed approvals as listed in the table below. (P	water use(s), including proposed construction Please attach documentation of applicable lan n/land-use decision and accompanying findin	on, involve disc	als which have
been obtained but all appeal periods ha		gs are sufficien	it.) If approvais nave
Type of Land-Use Approval Needed (e.g., plan amendments, rezones, conditional-use permits, etc.)	Cite Most Significant, Applicable Plan Policies & Ordinance Section References	Land-	Use Approval:
		Obtained Denied	☐ Being Pursued ☐ Not Being Pursued
		Obtained Denied	☐ Being Pursued ☐ Not Being Pursued
		Obtained Denied	☐ Being Pursued ☐ Not Being Pursued
		Obtained Denied	☐ Being Pursued ☐ Not Being Pursued
Resources Department regarding this propo	pecial land use concerns or make recommend osed use of water in the box below or on a se	eparate sheet.	
Proposed growing of nurse Structures Eubject to Devi	elopment Standards of 401.8	FU zone	(ZDO 401).
Name: <u>Vick Hart</u>	Title: Plany	ver	
Signature: Mu Dud	Date: 17/1	8/2024	
Governmental Entity: Clackanu.	s County Planning 120 Phone: 50	13-742	-4500
	owledging Request for Land Use Info	rmation	
this form while the applicant waits, you may have 30 days from the date of OWRD's Publi Oregon Water Resources Department. Pleas	he applicant. For new water right applications of complete this receipt and return it to the application to submit the complication to submit the complete while OWRD can accept a signed receipt mpleted Land Use Information Form is required	licant. If you sign pleted Land Use of as part of intal	n the receipt, you will Information Form to ke for an application
Applicant Name:			
Staff Name:	Title:		
Staff Signature:	Date:		-
39	Phone:		

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Attachment 5
Well Logs

39702 STATE OF OREGON AMENDED REPORT #2 WELL ID# WATER SUPPLY WELL REPORT 128877 (START CARD) # (as required by ORS 537.765) instructions for completing this report are on the last page of this form (9) LOCATION OF WELL by legal description:
County Clackamas Latitude (1) OWNER: Well Number: Longitude Name Leo Gentry Nurser y Township 2S E or W. of WM. Address 11251 SE 232nd 14 NE Section 10 NE 1/4 State OR Zip 97080 Gresham City Tax Lot 0300 Lot Block Subdivision (2) TYPE OF WORK: Street Address of Well (or nearest address) HWY 212 & 242 X New Well Deepening Alteration (repair/recondition) Abandonment (10) STATIC WATER LEVEL: 110 ft. below land surfa (3) DRILL METHOD: Date 2/25/00 ft. below land surface. X Rotary Air Rotary Mud Cable Auger Artesian pressure Ib. per square inch. Date Other (11) WATER BEARING ZONES: (4) PROPOSED USE: Depth at which water was first found 60 Community Domestic Industrial X Irrigation Thermal Injection Livestock Other From **Estimated Flow Rate** SWL 60 160 100 110 (5) BORE HOLE CONSTRUCTION: Special Construction approval Yes X No Depth of Completed Well 600 ft. Explosives used Tyes X No Type Amount HOLE SEAL Amount (12) WELL LOG: Diameter From To Material From To sacks or pounds Ground elevation 100 50 35 Sacks 12 Bentonite 8 100 500 From To SWL 6 500 600 Clay, Brown 8 0 Clay, Boulders, Gray 8 60 Boulders, Gray 60 90 110 Gravel & Sand, Brown 90 160 How was seal placed: Method A B C D D E Sand & Clay, Brown 160 200 X Other Poured from the top Clay, Blue, Sand & some Wood 200 400 Backfill placed from ft. to ft. Material Clay & Sand, Gray 400 410 Gravel placed from ft. to ft. Size of gravel Clay, Green & some Wood 410 485 Clay, Red (6) CASING/LINER: 485 580 Clay, Brown & Gray 580 600 Diameter From To Gauge Steel **Plastic** Welded Threaded 500 1/4 Casing: 8 +2 X X Liner: Received RECEIVED Final location of shoe(s) FFR 14 2025 APR 0 5 2000 (7) PERFORATIONS/SCREENS: X Perforations Method Air OWRD Screens Type Material WATER RESOURCES DEPT. SALEM OREGON Slot Tele/pipe From To size Number Diameter size Casing Liner 180 80 1 1/4 | 1500 X Date started 2/17/00 Completed 2/25/00

(unbonded) Water Well Constructor Certification:

I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards. Materials used and information reported above are true to my best knowledge and belief

П

Flowing

Artesian

Time

1 hr.

WWC Number Date

(bonded) Water Well Constructor Certification:

I accept responsibility for the construction, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards) This report is true to the best of my knowledge and belief.

WHICH WITHDEN 663 Date 3/30/00

ORIGINAL & FIRST COPY - WATER RESOURCES DEPARTMENT

(8) WELL TESTS: Minimum testing time is 1 hour

X Air

100

Drill stem at

_ Depth Artesian Flow found

Bailer

Drawdown

Was a water analysis done? Yes By whom

Did any strata contain water not suitable for intended use? Salty Muddy Odor Colored Other

Pump

100

Yield gal/min

Temperature of Water 54

Depth of strata:

SECOND COPY - CONSTRUCTOR

THIRD COPY - CUSTOMER

STATE OF OREGON WATER SUPPLY WELL REPORT required by ORS 537.765)
Instructions for completing this report are on the last page of this form

WELL ID# 39702 (START CARD)# 128882

(1) OWNER:	0.0000000000000000000000000000000000000	Well Number	647	(9) LOCATION OF WELL by legal description: County Clackamas Latitude	Longitude
Address 1125	Sentry Nursery	The state of the s		Township 2S N or S. Range 3E E	or W. of WM.
City Gres		State OR	Zip 97080	Section 11 NW ¼ NW	%
(2) TYPE OF	WORK:			Tax Lot 0300 Lot Block Subdi	vision
New Well		Atteration (repair/recondit	ion) X Abandonment	Hwy 212 & 242	
(3) DRILL ME				(10) STATIC WATER LEVEL:	
X Rotary Air	Rotary Mud	Cable	□ Auras	ft. below land surface.	ate 3/21/00
Other	Rotary Muu	Cable	Auger Auger		ate
(4) PROPOSI				(11) WATER BEARING ZONES: Depth at which water was first found	
☐ Domestic ☐ Thermal	Community Injection	Industrial Livestock	X Irrigation Other	From To Estimated Fk	W Data Claff
				Prom 10 Esumateur Pr	w Rate SWL
the interest of the contract o	LE CONSTRUC				
	Yes X No Ty	s X No Depth of Con	Amount		
HOLE		SEAL	Amount	(40) MELL 100.	
Diameter From	To Mater	rial From T	o sacks or pounds	(12) WELL LOG: Ground elevation	
				Material From	T = 1 au 1
	 			Material From Abandon the bottom 460' of well used 161 sacks	
	 			cement pumped in from the bottom up. Used a to	imy pipe.
	ced: Method A	B C D	□ E		
OtherBackfill placed from	mft. to	ft. Material			
Gravel placed fro			ı		
(6) CASING/L	INER:		~		
Dlamet Casing:	er From To	Gauge Steel Plasti	c Welded Threaded	APR 14 2000	
Liner:					
Final location of s	hoe(s)			WATER RESOURCES DEPT. SALEM, OREGON	
(7) PERFORA	TIONS/SCREE	NS:			Received
X Perforation		# = 10 m			EB 1 4 2025
Screens	Туре	Materia	b		B 1 4 2025
From To	Slot .	Tele/pipe	0		Olaron
From To 180 500	1 1/4 5760	Diameter size	Casing Liner		OWRD
				Date started 3/20/00 Completed 3/21/00	
			8 8	(unbonded) Water Well Constructor Certification: I certify that the work I performed on the construction, alteration, or	r abandonment
(8) WELL TES	STS: Minimum f	esting time is 1 ho	vir	of this well is in compliance with Oregon water supply well construc	ction standards.
Pump	Bailer	X Air	Flowing	Materials used and information reported above are true to my best libelief.	nowledge and
Mald addaile			Artesian		ber
Yield gal/min	Drawdown	Drill stem at	Time	Signed Date	
100		140 1	hr.	(handal) Water Wall Orand	
				(bonded) Water Well Constructor Certification: I accept responsibility for the construction, alteration, or abandor	ment work
				performed on this well during the construction dates reported above	. All work
Temperature of W	/ater 54 /sis done? Yes	Depth Artesian Flow four	nd	performed during this time is in compliance with Oregon water supp	
Did any strata con	tain water not suitabl		Too little	construction standards. This report is true to the best of my knowle WWC Numi	ber_663
Depth of strata:	***************************************				

Received

FEB 1.4 2025 CLAC 72510

STATE OF OREGON	WELL I.D. LABEL# L	
WATER SUPPLY WELL REPORT	START CARD# 10	31286
(as required by ORS 537.765 & OAR 690-205-0210)	ORIGINAL LOG #	
(1) LAND OWNER Owner Well I.D.	A	LAC 72510
First Name T&K Last Name		
	(9) LOCATION OF WELL (legal desc	
Company SESTER FARM INC. SESTER FAMILY FARM LLC Address 33205 SE OXBOW	County CLACKAMAS Twp 2 S N/S	
City GRESHAM State OR Zip 97080	Sec 10 NE 1/4 of the NE 1/4	Tax Lot 100
(2) TYPE OF WORK New Well Deepening Conversion	Tax Map Number Lat or or	DMS or DD
Alteration (complete 2a & 10) Abandonment(complete 5a)	Long c', ' " or	DMS or DD
(2a) PRE-ALTERATION	Street address of well	
Dia + From To Gauge Stl Pistc Wid Thrd Casing:	(Street address of Well (Neares	taddress
	24200 SE HWY 212 DAMASCUS OR 97089	
Material From To Amt sacks/lbs		
Seal:	(10) CT LTIC IVI TER I FILE	
(3) DRILL METHOD	(10) STATIC WATER LEVEL	
Rotary Air Rotary Mud Cable Auger Cable Mud		SWL(psi) + SWL(ft)
Reverse Rotary Other	Existing Well / Pre-Alteration Completed Well 08-17-2016	
		51
(4) PROPOSED USE Domestic Irrigation Community		Dry Hole?
Industrial/ Commercial Livestock Dewatering	WATER BEARING ZONES Depth water	was first found 70
Thermal Injection Other		w SWL(psi) + SWL(ft)
	The state of the s	. Swr(ii)
(5) BORE HOLE CONSTRUCTION Special Standard (Attach copy)	08-17-2016 70 160 49	51
Depth of Completed Well 165 ft.		
BORE HOLE SEAL sacks/		
Dia From To Material From To Amt Ibs		
18 0 165 Bentonite 0 65 89 S		
Calculated 72		
	(II) WELL LOC	
Calculated	(11) WELL LOG Ground Elevation	
How was seal placed: Method A B C D E	Material	From To
Other POURED IN	GRAVEL	0 2
Backfill placed from 65 ft to 165 ft Material sea gravel	BROWN CLAY W/COARSE GRAVEL	2 32
Backfill placed from 65 ft. to 165 ft. Material pea grave C	BROWN CLAY W/MEDIUM GRAVEL	32 68
	COARSE GRAVEL W/SAND	68 160
Explosives used: Yes Type Amount	GRAY CLAY	160 165
(5a) ABANDONMENT USING UNHYDRATED BENTONITE		
Proposed Amount Pounds Actual Amount Pounds		
- Total Amount		
(6) CASING/LINER Casing Liner Dia + From To Gauge Stl Plstc Wid Thrd		
11011 10 00000 01 1100 1110	RECEIVED BY OWRE	GEIVED BY OWN
● Q 14 X 3 165 250 ● Q X	RECEIVED BY OWNE	
	6010	OCT 1 3 2016
	SEP 1 9 2016	100. 10 2010
Shoe Inside Outside Other Location of shoe(s)		SALEM OF
Temp casing Yes Dia From To	SALEM, OF	JOREEMI OF
(7) PERFORATIONS/SCREENS Perforations Method PLASMA CUTTER		
Screens Type Material		
	Date Started 07-15-2016 Comple	ted 08-17-2016
Perf/S Casing/Screen Scm/slot Slot # of Tele/		
creen Liner Dia From To width length slots pipe size	(unbonded) Water Well Constructor Certificat	ion
	(unbonded) Water Well Constructor Certificat I certify that the work I performed on the const	ion ruction, deepening, alteration, or
creen Liner Dia From To width length slots pipe size	(unbonded) Water Well Constructor Certificat I certify that the work I performed on the const abandonment of this well is in compliance v	ruction, deepening, alteration, or vith Oregon water supply well
creen Liner Dia From To width length slots pipe size	(unbonded) Water Well Constructor Certificat I certify that the work I performed on the const abandonment of this well is in compliance v construction standards. Materials used and infor	ruction, deepening, alteration, or vith Oregon water supply well
creen Liner Dia From To width length slots pipe size	(unbonded) Water Well Constructor Certificat I certify that the work I performed on the const abandonment of this well is in compliance v construction standards. Materials used and infort the best of my knowledge and belief.	ion ruction, deepening, alteration, or vith Oregon water supply well nation reported above are true to
creen Liner Dia From To width length slots pipe size	(unbonded) Water Well Constructor Certificat I certify that the work I performed on the const abandonment of this well is in compliance v construction standards. Materials used and infor	ion ruction, deepening, alteration, or vith Oregon water supply well nation reported above are true to
creen Liner Dia From To width length slots pipe size Perf Casing 14 65 160 .125 12 150	(unbonded) Water Well Constructor Certificat I certify that the work I performed on the const abandonment of this well is in compliance v construction standards. Materials used and infort the best of my knowledge and belief. License Number Date	ion ruction, deepening, alteration, or vith Oregon water supply well nation reported above are true to
Creen Liner Dia From To width length slots pipe size	(unbonded) Water Well Constructor Certificat I certify that the work I performed on the const abandonment of this well is in compliance v construction standards. Materials used and infort the best of my knowledge and belief.	ion ruction, deepening, alteration, or vith Oregon water supply well nation reported above are true to
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(8) WELL TESTS: Minimum testing time is 1 hour Pump Bailer Pard Air Flowing Artesian Yield gal/min Drawdown Drill stem/Pump depth 160 49 Duration (hr)	(unbonded) Water Well Constructor Certificat I certify that the work I performed on the const abandonment of this well is in compliance v construction standards. Materials used and infort the best of my knowledge and belief. License Number Date Signed (bonded) Water Well Constructor Certification I accept responsibility for the construction, deep work performed on this well during the construction performed during this time is in compliance v	ruction, deepening, alteration, or vith Oregon water supply well nation reported above are true to ening, alteration, or abandonmen on dates reported above. All work vith Oregon water supply wel
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Creen Liner Dia From To width length slots pipe size Perf Casing 14 65 160 .125 12 150 (8) WELL TESTS: Minimum testing time is 1 hour Pump Bailer Air Flowing Artesian Yield gal/min Drawdown Drill stem/Pump depth Duration (hr) 49 160 4 Temperature 54 °F Lab analysis Yes By	(unbonded) Water Well Constructor Certificat I certify that the work I performed on the const abandonment of this well is in compliance of construction standards. Materials used and infort the best of my knowledge and belief. License Number Date Signed (bonded) Water Well Constructor Certification I accept responsibility for the construction, deep work performed on this well during the construction performed during this time is in compliance of construction standards. This report is true to the b	ruction, deepening, alteration, or vith Oregon water supply well nation reported above are true to ening, alteration, or abandonmen on dates reported above. All work vith Oregon water supply wel
Creen Liner Dia From To width length slots pipe size	Constructor Certificat Certify that the work Deformed on the construction standards. Materials used and inform the best of my knowledge and belief. Date Signed	ruction, deepening, alteration, or vith Oregon water supply well nation reported above are true to ening, alteration, or abandonmen and dates reported above. All work with Oregon water supply well est of my knowledge and belief.
Creen Liner Dia From To width length slots pipe size Perf Casing 14 65 160 .125 12 150 (8) WELL TESTS: Minimum testing time is 1 hour Pump Bailer Air Flowing Artesian Yield gal/min Drawdown Drill stem/Pump depth Duration (hr) 49 160 4 Temperature 54 °F Lab analysis Yes By	(unbonded) Water Well Constructor Certificat I certify that the work I performed on the construction standards. Materials used and infort the best of my knowledge and belief. License Number Date Signed (bonded) Water Well Constructor Certification I accept responsibility for the construction, deep work performed on this well during the construction performed during this time is in compliance of construction standards. This report is true to the believes Number	ruction, deepening, alteration, or vith Oregon water supply well nation reported above are true to ening, alteration, or abandonmen on dates reported above. All work to Oregon water supply well est of my knowledge and belief.
Creen Liner Dia From To width length slots pipe size Perf Casing 14 65 160 .125 12 150 (8) WELL TESTS: Minimum testing time is 1 hour Pump Bailer Air Flowing Artesian Yield gal/min Drawdown Drill stem/Pump depth Duration (hr) 49 160 4 Temperature 54 °F Lab analysis Yes By	Constructor Certificat Certify that the work Deformed on the construction standards. Materials used and inform the best of my knowledge and belief. Date Signed	ruction, deepening, alteration, or vith Oregon water supply well nation reported above are true to ening, alteration, or abandonmen on dates reported above. All work to Oregon water supply well est of my knowledge and belief.

STATE OF OREGON WATER SUPPLY WELL REPORT

(1) LAND OWNER

Company TGS FARMS Address 24200 City DAMASCUS

(2) TYPE OF WORK

(4) PROPOSED USE

(2a) PRE-ALTERATION

Material

Reverse Rotary Other

Industrial/ Commericial

BORE HOLE

From

62

Explosives used: Yes Type_

Liner

Shoe X Inside

Casing/ Screen

Screens Type

Temp casing Yes Dia (7) PERFORATIONS/SCREENS

How was seal placed:

Filter pack from _

Proposed Amount

(6) CASING/LINER

Casing

Perf/

Screen Liner

O Pump

Temperature 53

Yield gal/min

Water quality concerns?

Perf Casing

X Other POURED IN Backfill placed from .

Thermal Injection Other (5) BORE HOLE CONSTRUCTION

Depth of Completed Well 162.00 ft.

To

62

162

First Name

Casing:

Seal: (3) DRILL METHOD

Dia

14

10

CLAC 7

		Page 1 of 1
WELL I.D. LABEL# I	126875	
START CARD #	1041007	
ORIGINAL LOG#		

(as required by ORS 537.765 & OAR 690-205-0210) 3/2 Owner Well I.D

Zip 97089

Deepening

sacks/lbs

Auger | Cable Mud

Special Standard

SEAL

From

ft. Material

Amount

Actual Amount 60.00 Sacks

Location of shoe(s) 162

.250

Material

Scrn/slot

width

ft. Material

162

Domestic X Irrigation Community

Livestock Dewatering

Material

Bentonite Chips

Method

ft. to

X

Outside

Perforations Method Air knife

From

(8) WELL TESTS: Minimum testing time is 1 hour O Bailer

50.00 Sacks

Dia

ft. to_

(5a) ABANDONMENT USING UNHYDRATED BENTONITE

From

Other

To

160

Air

°F Lab analysis Yes By

Drill stem/Pump depth

Yes (describe below) TDS amount 71

Description

Last Name

OR X New Well

Alteration (complete 2a & 10)

From

X Rotary Air ☐ Rotary Mud ☐ Cable ☐

CLAC /4	1049		ADT CARD			
2/2/	(2010		ART CARD	1011	007	
3/26	/2019	ORIG	INAL LOG	#		
•	(9) LOCATI) <u>E</u> E/W WM
	Sec 10 N	JE 1/4	of the NE	1/4	Tax Lot	300
Zip 97089	Tax Map Numbe					
ning Conversion	Lat °	· -,	" or			DMS or DD
Abandonment(complete 5a)	Lat°_ Long°	,	" or			DMS or DD
. 3371 1 773 1	Long	ant addrage o	f well	Nagract o	ddrace	DIVIS OF DD
stc Wld Thrd cks/lbs	24200 SEE HW				duress	
	(10) STATIC	WATER				
Cable Mud	Existing We	II / Pre-Alter		ate S'	WL(psi)	+ SWL(ft)
	Completed V	Well	10/29/2	019		78.5
Community	- Ampietad	Flowir	ng Artesian?		y Hole?	
The state of the s				_	_	
ng	WATER BEARIN	NG ZONES	Depth	water wa	s first four	nd 89.00
	SWL Date	From	To	Est Flow	SWL(psi	+ SWL(ft)
al Standard (Attach copy)	10/29/2018	89	162	47	T	78.5
(10/29/2016	07	102	4/	 	76.3
AL sacks/					 	
om To Amt lbs	l 	 		***************************************	 	
62 60 S				***************************************		
Calculated 50						
	(11) WELL L	OC	***************************************			
Calculated	(11) WELL L	JUG	Ground Eleva	ition		
_C _D _E		Material			From	То
	Brown clay and	gravel			0	40
erial	Brown clay				40	62
Size	Sandy multicolor				62	80
nt	Medium to cours	se multicolor	ed gravel		80	162
DBENTONITE						
ount 60.00 Sacks			***************************************			
uge Stl Plstc Wld Thrd						
50 O X				eceiv	المحا	-
			, n	COL	UU	
			7		0000	
			PE	3 1 4	ZUZO	
			1			
ion of shoe(s) 162				OWR	n	
То				OVVI	<u> </u>	ř.
	L					
terial	Date Started 1	0/22/2018	Co	mplete	d 10/29/20	018
Slot # of Tele/	() () ()					
length slots pipe size	(unbonded) Wa					
2 635	abandonment of	f this well	formed on the	construc	tion, deep	ening, alteration, or water supply well
	construction star	ndards Mat	erials used and	l informat	ion report	ed above are true to
	the best of my ki			morma	non report	ed above are true to
	License Number			Date		
	License Ivanibei			Date _		
C Floreing Arteries	Signed					
Flowing Artesian	(h 1 - 1) - 11	W-B-C				
pth Duration (hr)	(bonded) Water					g 8 8
2						ion, or abandonment
						rted above. All work
						water supply well
			report is true to	the best	or my kno	wledge and belief.
S amount 71 ppm Amount Units	License Number	1738		Date 3/2	6/2019	6. 7 .0

ORIGINAL - WATER RESOURCES DEPARTMENT

Signed VANCE WAGNER (E-filed) Contact Info (optional) 503-665-3353

Revision Request 6/14/2019

STATE OF OREGON WATER SUPPLY WELL REPORT **CLAC 74936**

(as required by ORS 537.765 & OAR 690-205-0210)

4/23/2019

	Page 1 of 1
WELL I.D. LABEL# I	
START CARD #	1042229
ORIGINAL LOG#	

(1) LAND OWNER Owner Well I.D.	
First Name Last Name	(9) LOCATION OF WELL (legal description)
Company TGS FARMS	County CLACKAMAS Twp 2.00 S N/S Range 3.00 E E/W WM
Address 24200 SE HWY 212 City DAMASCUS State OR Zip 97089	Sec 10 NE 1/4 of the NE 1/4 Tax Lot 300
City DAMASCUS State OR Zip 97089 (2) TYPE OF WORK New Well Deepening Conversion	Tax Map Number Lot Lat o ' " or DMS or DD Long o ' " or DMS or DD
Alteration (complete 2a & 10) Abandonment(complete 5a)	Lat°' or DMS or DD
(2a) PRE-ALTERATION	Long or DMS or DD
Dia + From To Gauge Stl Plstc Wld Thrd	Street address of well Nearest address
Casing:	24200 SE HWY 212 DAMASCUS OREGON 97089
Material From To Amt sacks/lbs Seal:	
(3) DRILL METHOD	(10) STATIC WATER LEVEL
Rotary Air Rotary Mud Cable Auger Cable Mud	Date SWL(psi) + SWL(ft)
Reverse Rotary Other	Existing Well / Pre-Alteration
	Completed Well 3/28/2019 132
(4) PROPOSED USE Domestic Irrigation Community	Flowing Artesian? Dry Hole?
Industrial/Commericial Livestock Dewatering	WATER BEARING ZONES Depth water was first found 140.00
Thermal Injection Other	SWL Date From To Est Flow SWL(psi) + SWL(ft)
(5) BORE HOLE CONSTRUCTION Special Standard (Attach copy	7) 3/28/2019 140 195 50 132
Depth of Completed Well 195.00 ft.	
BORE HOLE SEAL sacks.	
Dia From To Material From To Amt Ibs	
14 0 57 Bentonite Chips 0 57 63 S	
10 37 193	
Calculated	(11) WELL LOG Ground Elevation
How was seal placed: Method A B C D E	Material From To
XOther POURED IN	Brown sticky clay 0 57
Backfill placed from ft. to ft. Material	Medium to course multicolored gravel 57 71
Filter pack from ft. to ft. Material Size	Course sand with small grey gravel 71 123
Explosives used: Yes Type BENTONITI Amount	Course gravel w/ course sand & blue clay 123 190 Blue clay 190 195
(5a) ABANDONMENT USING UNHYDRATED BENTONITE	Blue clay 190 195
Proposed Amount Actual Amount	
(6) CASING/LINER Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd	
● 8 X 2 195 .250 ● C X	
	Received
	FEB 1 4 2025
Shoe Inside Outside Other Location of shoe(s) 195	1 1 1 2 1 1 2 2 2 2
Temp casing Yes Dia From + To	CVAIDE
(7) PERFORATIONS/SCREENS	OWRD
Perforations Method Air knife	D. G. James G. J. James
Screens Type Material Perf/ Casing/ Screen Scrn/slot Slot # of Tele/	Date Started 3/22/2019 Completed 3/28/2019
Screen Liner Dia From To width length slots pipe size	(unbonded) Water Well Constructor Certification
Perf Casing 8 135 185 .125 2 500	I certify that the work I performed on the construction, deepening, alteration, or
	abandonment of this well is in compliance with Oregon water supply well
	construction standards. Materials used and information reported above are true to the best of my knowledge and belief.
	License Number Date
(8) WELL TESTS: Minimum testing time is 1 hour	
Pump Bailer • Air Flowing Artesian	Signed
Yield gal/minDrawdownDrill stem/Pump depthDuration (hr)	(bonded) Water Well Constructor Certification
50 195 1.5	I accept responsibility for the construction, deepening, alteration, or abandonment
	work performed on this well during the construction dates reported above. All work
	performed during this time is in compliance with Oregon water supply well
Temperature 54 °F Lab analysis Yes By	construction standards. This report is true to the best of my knowledge and belief.
Water quality concerns? Yes (describe below) TDS amount 66 ppm	License Number 1738 Date 4/23/2019
From To Description Amount Units	
	Signed VANCE WAGNER (E-filed) Contact Info (optional)

File Original, and Duplicate with the STATE ENGINEER, SALEM, OREGON WATER WELL DRILL OF OR STATE OF OR	
(1) OWNER)	(10) WELL TESTS:
Name and Hathale	Was a pump test made? Yes I No If yes, by whom?
/ Address 27 3 18 6 271	Yield: gal./min. with ft. draw down after hrs.
Boring The	n n n n
(2) LOCATION, OF WELL:	Artesian flow g.p.m.
County (Cackenus Owner's number, if any-	Shut-in pressurelbs, per square inch.
R. F. D. or Street No.	Bailer test g.p.m. with ft. drawdown
Bearing and distance from section or subdivision corner	Temperature of water Was a chemical analysis made? ☐ Yes ☐ No
1200 11 1300 00 300 00	Was electric log made of well? Yes
flat on Range & 5	(11) WELL LOG:
(a) manual ole model (-11-).	Diameter of well, inches.
(3) TYPE OF WORK (check): New well Deepening Reconditioning Abandon	Total depth 380 ft. Depth of completed well \ ft.
abandonment, describe material and procedure in Item 11.	Formation: Describe by color, character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated, with at legst one entry for each change of formation.
(4) PROPOSED USE (check): (5) EQUIPMENT:	and the second second
Domestic F Industrial Municipal Rotary	it to 40 it commences
Irrigation G Test Well G Other	40 12 Cemples of the second
Dug Well	42" 84" " marcel"
CASING INSTALLED: If gravel packed	7-"
hreaded Welded Gage	34 106 Blue Clay
FROM ft. to ft. Diam. Wall of Bore ft. ft,	11/2115
n n n n n	106, 113 Brown
n n n n n n n n n	115 163" Graves
n n n n n n n	" 150
n n n n n	163"-182" Blue clay
Type and size of shoe or well ring Size of gravel:	107 25 0 11 00 0
Describe joint	132,-0338, Surero Hann
(7) PERFORATIONS:	205 325 Plue class
Type of perforator used	
SIZE of perforations in., length, by in. FROM 7 . It. to 1 ft. perf per foot No. of rows	305 345 Quele Dans
1. 1	ente to so all and
0 9 0 0 0 0 0 0	and of o were class
	313-380 Quich Jan
n n n n n n n n n n	" " " " " " " " " " " " " " " " " " " "
SCREENS: Give Manufacturer's Name, Model No. and Size	
	" " 1956
CONSTRUCTION:	" " " TER
Was a surface sanitary seal provided? Yes No To what depth ft.	" "
Were any strata sealed against pollution? ☐ Yes ☐ No If yes, note depth of strata	Ground elevation at well site
FROM ft. to ft.	Work started man 1/1956 Completed 14 1956
11 11	Well Driller's Statement: This well was drilled under my jurisdiction and this report is
METHOD OF SEALING	true to the best of my knowledge and belief.
(9) WATER LEVELS:	NAME (. C. Hamblet
Depth at which water was first found ft.	(Person, firm, or edrporation) (Typed or printed)
Standing level before perforating ft.	Address 61/6 DE 86
Standing level after perforating ft.	Driller's well number
Log Accepted by:	[Signed] (Well Drilley)
[Signed] Carl J. Machine 1950	License No. 13 Dated Oct 30 19 36
(1)	Pacaived
	Heceived 14

FEB 1 4 2025